

California State Library  
Library Services and Technology Act (LSTA)  
Fiscal Year 2001/2002

**APPLICATION (LSTA 6)**

Submit in five (5) copies by 4:30 p.m., Monday, **June 11, 2001**, to Attn: Jay Cunningham, Library Development Services, California State Library, P.O. Box 942837, Sacramento, CA 94237-0001, for mail. (Express delivery: 900 N Street, Suite 500, Sacramento, CA 95814). FAX is not acceptable. INFORMATION: Tel. (916) 653-5217.

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1. Project title: \_\_\_\_\_
  2. Applicant name and jurisdiction: \_\_\_\_\_  
\_\_\_\_\_
  3. Applicant contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
FAX: \_\_\_\_\_ E-mail: \_\_\_\_\_
  4. District: Assembly \_\_\_\_\_ State Senate \_\_\_\_\_ House \_\_\_\_\_
  5. Population: Client \_\_\_\_\_ Total \_\_\_\_\_
  6. Participants other than applicant:

SIGNATURE

LIBRARY/AGENCY

- 
7. LSTA amount requested: \$ \_\_\_\_\_

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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8. Project Summary: complete in space provided.

**State Plan Reference (e.g. "Goal C. S-T #1"):** \_\_\_\_\_

**(Limit this summary to this page only)**

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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9. Budget Summary

- a. Salaries & Benefits
- b. Library Materials
- c. Operation
- d. Equipment (\$5K+)
- e. Total for Objectives
- f. Indirect Cost
- g. TOTAL

LSTA (1)	Other funds (2)	In-kind (3)	Total (4)

10. Client needs and project goals.

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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11. Measurable objectives to reach goals.

12. Project actions in time sequence.

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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13. Personnel requirements and staff training.

14. Public relations plan.

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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15. Statewide significance.

16. Evaluation.

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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17. Methods of continuation:

A. Local

B. Statewide

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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18. Program budget: LSTA funds requested. (Use extra pages if more than 3 objectives.)

	<u>          </u> (1)	<u>          </u> (2)	<u>          </u> (3)	Total (4)
a. Salaries:				
list personnel (use part 19. for detail and to explain)				
Benefits:				
@ ____ %				
SUBTOTAL				_____
<hr/>				
b. Library Materials:				
SUBTOTAL				_____
<hr/>				
c. Operation:				
Contracts				
Equipment (under \$5,000)				
Comp. software				
Database sub's.				
Postage				
Printing				
Supplies				
Telecom				
Travel				
Other (specify):				
SUBTOTAL				_____



Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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18. Program budget: LSTA funds requested, cont'd.

	(1)	(2)	(3)	Total (4)
d. Equipment (over \$5,000)				
SUBTOTAL				
<hr/>				
e. TOTAL FOR OBJECTIVES				
<hr/>				
f. Indirect cost, maximum 10% of line e. TOTAL				
<hr/>				
<div><b>g. TOTAL LSTA</b></div>				
<hr/>				
h. Other funds				
SUBTOTAL				
<hr/>				
i. In-kind				
SUBTOTAL				
<hr/>				
j. TOTAL PROJECT				

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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19. Narrative support for budget.

Project Title: \_\_\_\_\_

Applicant Jurisdiction: \_\_\_\_\_

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20. Certification.

- a. I affirm that the jurisdiction or agency named below is the legally designated fiscal agent for this program and is authorized to receive and expend funds for the conduct of this program.
- b. I affirm that any or all other agencies participating in the program have agreed to the terms of the application/grant award, and have entered into an agreement(s) concerning the final disposition of equipment, facilities, and materials purchased for this program from the funds awarded for the activities and services described in the attached, as approved and/or as amended, application.

(Signed): \_\_\_\_\_  
Authorized representative (For schools, should be Principal/Supt.) \_\_\_\_\_ Date \_\_\_\_\_

(Printed): \_\_\_\_\_  
Name and title

Organization: \_\_\_\_\_

Street/mail address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ ZIP+4: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

INTERNET E-mail: \_\_\_\_\_

*JLC:jlc*  
*A:LSTAAPP6A.001*